WHAT IS CLAIMED IS:

1. Apparatus for mapping out endoluminal gastrointestinal surgery, the apparatus comprising:

an endoluminal support configured for endoluminal placement within a gastrointestinal lumen; and

a marking device disposed on the support, the marking device configured to submucosally mark the gastrointestinal lumen.

2. The apparatus of claim 1, further comprising an approximation element configured to approximate the support and a mucosal surface of the gastrointestinal lumen.

3. The apparatus of claim 2, wherein the approximation element is disposed on the endoluminal support.

4. The apparatus of claim 2, wherein the approximation element comprises an element chosen from the group consisting of suction ports, inflation elements and combinations thereof.

5. The apparatus of claim 1, wherein the submucosal marking device comprises needles configured to penetrate mucosal tissue.

6. The apparatus of claim 5, wherein the needles are configured to inject marking elements submucosally.

7. The apparatus of claim 5, wherein the marking elements are chosen from the group consisting of dyes, fluorescent dyes, colored dyes, saline, bulking agents, collagen, spheres, nanospheres, magnetic materials, ferromagnetic materials, Curie point materials, plastic materials, inert materials, radiopaque materials, bioresorbable materials and combinations thereof.

8. Apparatus for mapping out endoluminal gastrointestinal surgery, the apparatus comprising:

an endoluminal support configured for endoluminal placement within a gastrointestinal lumen; and

a radiofrequency element on the support for marking the gastrointestinal lumen.

9. The apparatus of claim 8 further comprising an approximation element configured to approximate an interior of the gastrointestinal lumen and the endoluminal support.

10. The apparatus of claim 9, wherein the approximation element is disposed on the endoluminal support.

11. The apparatus of claim 8, wherein the radiofrequency element comprises at least one electrode, the at least one electrode disposed on a surface of the endoluminal support and coupleable to a radiofrequency generator.

12. The apparatus of claim 9, wherein the approximation element comprises an element chosen from the group consisting of suction ports, inflation elements and combinations thereof.

13. Apparatus for mapping out endoluminal gastrointestinal surgery, the apparatus comprising:

an endoluminal support configured for endoluminal placement within a gastrointestinal lumen; and

a marking device disposed on the support for marking the gastrointestinal lumen with pegs.

14. The apparatus of claim 13 further comprising an approximation element configured to approximate an interior of the gastrointestinal lumen and the endoluminal support.

15. The apparatus of claim 14, wherein the approximating element is disposed on the endoluminal support.

16. The apparatus of claim 13, wherein the marking device further comprises surgical mesh.

17. Apparatus for mapping out endoluminal gastrointestinal surgery, the apparatus comprising:

an endoluminal support configured for endoluminal placement within a gastrointestinal lumen; and

indicia on the endoluminal support which are visible to provide a map of the endoluminal gastric reduction when the endoluminal support is present in the gastrointestinal lumen.

18. The apparatus of claim 17 further comprising an approximation element configured to approximate an interior of the gastrointestinal lumen and the endoluminal support.

19. The apparatus of claim 15, wherein the approximating element is disposed on the endoluminal support.

20. The apparatus of claim 17, wherein the indicia are chosen from the group consisting of dimensions, shapes, colors, textures, and combinations thereof.

21. A method for mapping out endoluminal gastric reduction, the method comprising:

advancing an endoluminal support into a patient's stomach; and

submucosally marking an interior of the stomach at at least one specified location.

22. The method of claim 21, wherein submucosally marking the interior further comprises approximating the interior and the endoluminal support.

23. The method of claim 21, wherein submucosally marking the interior further comprises submucosally injecting at least one marking element into a wall of the stomach.

24. The method of claim 18, wherein submucosally marking the interior further comprises submucosally marking the interior with at least one marking element chosen from the group consisting of dye, bulking agents, spheres and combinations thereof.

25. A method for mapping out endoluminal gastric reduction, the method comprising:

advancing a radiofrequency endoluminal support into a patient's stomach; and

exposing an interior of the stomach to radiofrequency energy from the support at at least one specified location, wherein said exposure creates a visible marking.

26. The method of claim 25 further comprising approximating the interior of the stomach and the endoluminal support.

27. The method of claim 25, wherein exposing the interior to radiofrequency energy comprises locally burning a mucosa layer of the interior of the stomach.

28. A method for mapping out endoluminal gastric reduction, the method comprising:

advancing an endoluminal support into a patient's stomach; and

marking an interior of the stomach at specified locations with at least one peg delivered from the endoluminal support.

29. The method of claim 28 further comprising approximating the interior of the stomach and the endoluminal support.

30. The method of claim 28 further comprising marking the interior with surgical mesh.

31. A method for mapping out endoluminal gastric reduction, the method comprising:

advancing an endoluminal support into a patient's stomach; and

detecting indicia of the endoluminal support to map out endoluminal gastric reduction.